

APPLICATION DATA SHEET**Application Information**

Application number:: TBA
Filing Date:: Herewith
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?::
Computer Readable Form (CRF)?:: No
Number of copies of CRF::
Title :: REGULATORY T CELLS AND THEIR USE IN
Attorney Docket Number:: IMMUNOTHERAPY AND SUPPRESSION OF
22253-76278 AUTOIMMUNE RESPONSES
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: Yes
Petition included?:: No
Petition Type::
Licensed U.S. Gov't Agency?:: Yes
Contract or Grant No:: RO1 AI34495, R37 HL56067 and PO1 AI35225
from the National Institutes of Health
Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Bruce
Middle Name::
Family Name:: BLAZAR
Name Suffix::
City of Residence:: Golden Valley
State or Province of Residence:: MN
Country of Residence:: US
Street of mailing address:: 4350 Sussex Road
City of mailing address:: Golden Valley
State or Province of mailing address:: MN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 55416

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Carl
Middle Name::
Family Name:: JUNE
Name Suffix::
City of Residence:: Merion Station
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 409 Baird Road

City of mailing address:: Merion Station
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19066

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Wayne
Middle Name:: B.
Family Name:: GODFREY
Name Suffix::
City of Residence:: Birchwood
State or Province of Residence:: MN
Country of Residence:: US
Street of mailing address:: 409 Lake Avenue
City of mailing address:: Birchwood
State or Province of mailing address:: MN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 55110

Fourth Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Richard
Middle Name:: G.
Family Name:: CARROLL

Name Suffix::

City of Residence:: Lansdowne
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 54 Bryn Mawr Avenue
City of mailing address:: Lansdowne
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19050

Fifth Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Bruce
Middle Name::
Family Name:: LEVINE
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence:: US
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address:: US
Postal or Zip Code of mailing address::

Sixth Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: James
Middle Name:: L.
Family Name:: RILEY
Name Suffix::
City of Residence:: Downingtown
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 435 Creekside Drive
City of mailing address:: Downingtown
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19355

Seventh Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Patricia
Middle Name::
Family Name:: TAYLOR
Name Suffix::
City of Residence:: St. Paul
State or Province of Residence:: MN
Country of Residence:: US
Street of mailing address:: 1049 Blair Avenue

City of mailing address:: St. Paul
 State or Province of mailing address:: MN
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 55104

Correspondence Information

Correspondence Customer Number :: **27730**
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Representative Information

Representative Customer Number::		27730
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e) AND	60/374,356	April 19, 2002
	Claims the benefit under 35 USC 119(e)	60/550,481	March 5, 2004

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::